



THE STRONGEST NAME IN ROPE

Home >> SSR-1200-3

February 26, 2009

Product Code:226

SSR-1200-3

The highest strength and most wear-resistant combination rope produced. SSR-1200 ropes are a compound plied yarn construction that utilizes the ultimate compatibility of filament polyester and Ultra Blue fibers. This unique combination yields strength and wear resistance equal to an all-polyester rope but with a significant reduction in weight.

FEATURES

- Higher strength than other combo ropes
- More durable than polypropylene
- More economical than polyester
- Lighter weight than an all polyester rope
- Class 1 S-Strand splice
- Equal strength and wear of an all Polyester rope
- 20% less weight than an all Polyester rope
- Low working elongation
- Excellent grip on H-bits

APPLICATIONS

- Barge and Dredge Working Lines
- Non-HMPE Tug Lines
- Loadlines and Working Ropes

TECHNICAL SPECIFICATIONS

• Specific Gravity...

1.2

• Elastic Elongation...

At % break strength

10%	20%	30%
1.6%	3.2%	4%

Rope stabilized from 200D2. Ropes cycled 50 times at each percent of average break strength.

INCH	MM	LBS/100 FT	KG/100M	SAMSON AVERAGE STRENGTH LBS	SAMSON AVG STRENGTH KG	SAMSON MIN STRENGTH LBS	SAMSON MIN STRENGTH KG	ISO/BS EN818 METRIC TONNES
5/4	18	14.4	21.4	14,800	6,700	13,500	6,000	6.7
13/16	20	17.3	26.7	17,600	8,000	16,600	7,200	8.0
7/8	22	20.6	30.7	20,900	9,500	19,800	8,500	9.5
1	24	25.6	36.1	25,400	11,500	22,900	10,400	11.5
1-1/8	28	33.0	49.1	32,900	14,900	29,500	13,400	14.9
1-1/4	30	36.4	53.6	36,000	17,700	35,100	15,900	17.7
1-5/16	32	43.3	64.4	43,000	19,500	38,700	17,600	19.5
1-1/2	38	50.2	73.6	50,000	24,500	48,800	22,000	24.5
1-5/8	40	58.0	101	58,000	29,500	56,500	28,500	29.5
1-3/4	44	73.4	117	75,000	34,000	67,500	30,800	34.0
2	48	89.0	147	94,000	42,600	84,800	38,400	42.6
2-1/8	52	111	168	105,000	47,600	94,500	42,900	47.6
2-1/4	56	129	182	120,000	54,400	108,000	49,000	54.4
2-1/2	60	150	232	142,000	64,400	128,000	58,000	64.4
2-5/8	64	170	263	166,000	70,800	140,000	63,700	70.8
3	72	221	328	202,000	91,600	182,000	82,500	91.6
3-1/4	80	263	391	240,000	109,000	218,000	98,000	109

Please Return To:
 Department of Industrial Relations
 Division Of Occupational Safety & Health
 PSM R6 D3
 1450 Enea Circle Suite 550
 Concord, CA 94520
 Tel. No. (925) 802-2665
 Fax No. (925) 802-2668
 Attention: Lisa Matta



DOCUMENT REQUEST SHEET

Employer: Chevron USA, Inc.Contact Name: Tom DiPalmaDate: 7/29/10Fax or Postmark by: August 16, 2010Received by: [Signature]

signature required

As discussed during the inspection on 7/29/10, it has been determined that copies of the following documents are required for review. Please provide the Cal/OSHA inspector with the required copies by the "Fax or Postmark by" date noted above. If the copies are not provided by that date, then it will be interpreted as an admission that the documents do not exist and possible Citations and Monetary Penalties could result.

- ☒ Facility layout (i.e., floor plan, process flow diagram, evacuation route plan, equipment map) Berth Hap Rec'd _____
ancho
☒ Cal/OSHA Form 300 Log of Occupational Injuries and Illnesses Rec'd _____
 Years: ☒ 2009 ☒ 2008 ☒ 2007
☒ Cal/OSHA Form 300A Summary of Occupational Injuries and Illnesses Rec'd _____
 Years: ☒ 2009 ☒ 2008 ☒ 2007
☒ State of California Form 5020 Employer's Report of Occupational Injury or Illness Rec'd _____
 for the following employee(s) I
☐ State of California Form 5021 Doctor's First Report of Occupational Injury or Illness Rec'd _____
 for the following employee(s) _____
☐ Evidence of Workers' Compensation Insurance coverage (including current Experience Modification Rating) Rec'd _____
☒ Injury and Illness Prevention Program, and Code of Safe Practices Rec'd _____
☒ Inspection Records for moving wench or cap stand Rec'd _____
☒ Training Records (last 3 months) for operator of moving wench Rec'd _____
☐ Safety Committee Meeting minutes (if used) (ONLY) Rec'd _____
☐ First Aid Kit approval (from physician) Rec'd _____
☐ Emergency Action Plan Rec'd _____
☐ Fire Prevention Plan Rec'd _____
☐ Hazard Communication Program Rec'd _____
☐ Material Safety Data Sheets (MSDS) for _____ Rec'd _____
☐ Respiratory Protection Program Rec'd _____
☐ Hearing Conservation Program (Noise) Rec'd _____
☐ Exposure Control Program (Bloodborne Pathogens) Rec'd _____
☐ Workplace Exposure Records (airborne contaminants, noise, etc.) for _____ Rec'd _____
☐ Chemical Hygiene Plan (Laboratories) Rec'd _____
☐ Carcinogen Registration for _____ Rec'd _____
☒ Permits/Variances for _____ Rec'd _____
☒ Maintenance Records for moving wench/cap stands (1 year) or last Rec'd _____
☒ Safety instructions/equipment operating manuals for moving wench/cap stands Rec'd _____
☒ Written Hazardous Energy Control Program (Lockout/Tagout) & training records. Rec'd _____

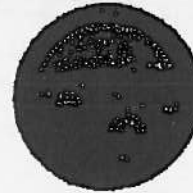
If you require an extension of time in order to satisfy this request, please contact the Cal/OSHA inspector identified with your inspection at the phone numbers above.

INSPECTION NO. _____

CSE/IH ID. 17311OPT. RPT NO. 01-11

Cal/OSHA 1AY

Please Return To:
 Department of Industrial Relations
 Division Of Occupational Safety & Health
 PSM Unit R8D3
 1450 Enea Circle, Suite 550
 Concord, CA 94520
 Tel. No. (925) 802-2665
 Fax No. (925) 802-2668
 Attention: Lisa Matto



DOCUMENT REQUEST SHEET

Employer: Chertron, USA, Inc

Contact Name: Tom DiPalma

Date: 7/29/10

Fax or Postmark by: August 10, 2010

Received by: [Signature]

signature required

As discussed during the inspection on 7/29/10 it has been determined that copies of the following documents are required for review. Please provide the Cal/OSHA inspector with the required copies by the "Fax or Postmark by" date noted above. If the copies are not provided by that date, then it will be interpreted as an admission that the documents do not exist and possible Citations and Monetary Penalties could result.

- | | |
|--|-------------|
| <input checked="" type="checkbox"/> <u>Heat Illness Program</u> | Rec'd _____ |
| <input checked="" type="checkbox"/> <u>Copy of Accident Investigation</u> | Rec'd _____ |
| <input checked="" type="checkbox"/> <u>Names and address of ^{Chertron} employees working at the</u> | Rec'd _____ |
| <input type="checkbox"/> <u>time of the accident on the wharf on 7/28/10.</u> | Rec'd _____ |
| <input checked="" type="checkbox"/> <u>Manufacturing and information on the ropes used</u> | Rec'd _____ |
| <input type="checkbox"/> <u>at the wharf to moor ships/barges, specifically</u> | Rec'd _____ |
| <input type="checkbox"/> <u>messenger line (ropes)</u> | Rec'd _____ |
| <input type="checkbox"/> _____ | Rec'd _____ |
| <input type="checkbox"/> _____ | Rec'd _____ |
| <input type="checkbox"/> _____ | Rec'd _____ |
| <input type="checkbox"/> _____ | Rec'd _____ |
| <input type="checkbox"/> _____ | Rec'd _____ |

If you require an extension of time in order to satisfy this request, please contact the Cal/OSHA inspector identified with your inspection at the phone numbers above.

INSPECTION NO. _____

CSE/IH ID. 17311

OPT. RPT NO. _____

06-11
Cal/OSHA IAY

DiPalma, Thomas (TomDiPalma)

From: Matta, Lisa@DIR [LMatta@dir.ca.gov]
Sent: Monday, August 02, 2010 8:15 AM
To: DiPalma, Thomas (TomDiPalma)
Subject: RE: Chevron Wharf July 25 Hand Injury Inspection/Investigation; dated 7/29/2010

Good Morning Tom,
I will send the second request today for the other items that we discussed, as well.

1. Inspection Records for the "cap stand" for the incident of July 26, 2010, only for 6 months, please.
2. "or last inspection docs" for the mooring winch/cap stand involved in July 25, 2010 incident. Is there a serial number for that particular winch? I have the number from the motor.
3. My inspection number is 314324187.

I will wait to hear from you regarding the possibility of coming out this week. Is I d going to be back or shall I call him at home to schedule an interview?

REDACTED

Thanks,
Lisa

-----Original Message-----

From: DiPalma, Thomas (TomDiPalma) [mailto:TomDiPalma@chevron.com]
Sent: Monday, August 02, 2010 8:03 AM
To: Matta, Lisa@DIR
Cc: Sarmicanic, Peter N
Subject: RE: Chevron Wharf July 25 Hand Injury Inspection/Investigation; dated 7/29/2010

Lisa,

Per my voice message sent this morning, I have a few clarifying questions on the information request:

- Inspection Records for "mooring winch" or "cap stand" – I understand this to mean the "mooring winch" or "cap stand" involved in the July 25 incident only. However, how far back to you want to see inspection records for, i.e., one year, most recent?
- Maintenance Records for mooring winches/cap stands (1-year or last inspection....). Two items for clarification; 1. "Inspection of....", not sure what was written after inspection, and 2. I think you only want the maintenance records for the mooring winch/cap stand involved in the incident, but I need to clarify this since the maintenance record request is written in plural form?
- What Report/Inspection number should I refer to for this investigation?

I will be checking the shipping schedule and will let you know if we have a ship to be moored that gives you time to witness the operation.

Thanks,

Tom DiPalma
Safety Team Lead
Richmond Refinery
Chevron Global Manufacturing
Phone 510-242-2233
Cell 510-230-3769

From: Matta, Lisa@DIR [mailto:LMatta@dir.ca.gov]
Sent: Friday, July 30, 2010 8:22 AM

Confidential Business Information

To: DiPalma, Thomas (TomDiPalma)
Subject: RE: Interviews

Tom,

Great. I am on the way. My cell number is 707-322-4169.

-----Original Message-----

From: DiPalma, Thomas (TomDiPalma) [mailto:TomDiPalma@chevron.com]
Sent: Friday, July 30, 2010 8:19 AM
To: Matta, Lisa@DIR
Subject: RE: Interviews

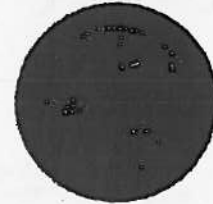
We are on for 9am today. Just tried calling you – I do not have your office phone number. But the crew is ready and available.

Tom

From: Matta, Lisa@DIR [mailto:LMatta@dir.ca.gov]
Sent: Friday, July 30, 2010 8:14 AM
To: DiPalma, Thomas (TomDiPalma)
Subject: FW: Interviews

Good Morning Tom,
I was wondering if we want to do interviews this morning? I need to be back by Noon so we can do them today or early next week. I forgot that I had scheduled something today. Let me know and I will accommodate everyone.
Thanks,
Lisa-

Please Return To:
Department of Industrial Relations
Division Of Occupational Safety & Health
PSM Unit R6D3
1450 Enea Circle, Suite 550
Concord, CA 94520
Tel. No. (925) 802-2885
Fax No. (925) 802-2888
Attention: Lisa Matta

**DOCUMENT REQUEST SHEET**

Employer: Chevron USA, Inc. dba Chevron
Products Co.

Contact Name: Tom DiPalma

Date: August 2, 2010

Fax or Postmark by: August 16, 2010

Received by: _____
signature required

As discussed during the inspection on 7/30/10 it has been determined that copies of the following documents are required for review. Please provide the Cal/OSHA inspector with the required copies by the "Fax or Postmark by" date noted above. If the copies are not provided by that date, then it will be interpreted as an admission that the documents do not exist and possible Citations and Monetary Penalties could result.

- | | | |
|-------------------------------------|---|-------------|
| <input checked="" type="checkbox"/> | Standard Operating Procedures for the Cap Stand aka Mooring Winch located at Berth #4 | Rec'd _____ |
| <input checked="" type="checkbox"/> | Job Aid or Training materials for the Cap Stand aka Mooring Winch located at Berth #4 | Rec'd _____ |
| <input checked="" type="checkbox"/> | Manufacturer Information including size and materials for messenger line rope being used on Berth #4 on 7/25/10 | Rec'd _____ |
| <input type="checkbox"/> | _____ | Rec'd _____ |
| <input type="checkbox"/> | _____ | Rec'd _____ |
| <input type="checkbox"/> | _____ | Rec'd _____ |
| <input type="checkbox"/> | _____ | Rec'd _____ |
| <input type="checkbox"/> | _____ | Rec'd _____ |
| <input type="checkbox"/> | _____ | Rec'd _____ |
| <input type="checkbox"/> | _____ | Rec'd _____ |
| <input type="checkbox"/> | _____ | Rec'd _____ |
| <input type="checkbox"/> | _____ | Rec'd _____ |

If you require an extension of time in order to satisfy this request, please contact the Cal/OSHA inspector identified with your inspection at the phone numbers above.

INSPECTION NO. 314324187 _____

CSE/IH ID. I7311

OPT. RPT NO. 001-11 _____